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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3 AND DISBURSEMENTS For An Authorized Committee						Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT		ample: If typinger the lines.	g, type	12FE4M5	
KYLE MCCARTER I	FOR CONGRE					
<u> </u>		<u> </u>				
ADDRESS (number and street)	40 COMMERC	E LANE				
Check if different than previously reported. (ACC)	LEBANON				<u> </u>	62264
2. FEC IDENTIFICATION	NUMBER ▼	CITY ▲		(STATE A	ZIP CODE
C C00589739		3. IS THIS REPORT	× NEW (N)	OR	AMENI (A)	STATE ▼ DISTRICT DED IL 15
	ly Report (Q1) y Report (Q2) urterly Report (Q3) r-End Report (YE)	Election on	Election Report Primary (12P) Convention (12P) Convention (12P) F-Election Report General (30G)	oort for the:	General (** Special (1** Y Y Y Y Runoff (30** Y Y Y Y	in the State of Special (30S)
5. Covering Period	04 / 01 /	2016	through	M M 06	30	Y Y Y Y Y 2016
I certify that I have examined		-	owledge and l	pelief it is tru	ue, correct and	d complete.
Type or Print Name of Treasi	urer Kelly Standfie	ld			To Lo	
Signature of Treasurer	Kelly Standfield		[Electronically I	Filed] D	ate 07	15 2016
NOTE: Submission of false, en	roneous, or incomple	te information may s	subject the per	son signing t	his Report to t	he penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

KYLE MCCARTER FOR CONGRESS COMMITTEE

			COLUMN A This Period	COLUMN B Election Cycle-to-Date
ô.	Net	Contributions (other than loans)		
	(a)	Total Contributions (other than loans) (from Line 11(e))	26394.00	341486.34
	(b)	Total Contribution Refunds (from Line 20(d))	24300.00	80263.69
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	2094.00	261222.65
7.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	22557.16	378350.23
	(b)	Total Offsets to Operating Expenditures (from Line 14)	652.61	695.90
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	21904.55	377654.3
3.		ch on Hand at Close of corting Period (from Line 27)	3568.32	
9.	the	ots and Obligations Owed TO Committee (Itemize all on ledule C and/or Schedule D)	0.00	
10.	the	ots and Obligations Owed BY Committee (Itemize all on ledule C and/or Schedule D)	160122.69	

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

KYLE MCCARTER FOR CONGRESS COMMITTEE

Report Covering the Period: From: 04 01 2016 To: 06 30 2016

	I. RECEIPTS	I. RECEIPTS COLUMN A Total This Period		
11. C	ONTRIBUTIONS (other than loans) FROM:			
(a	n) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	25650.00	301021.93	
	(ii) Unitemized	594.00	30700.00	
	(iii) TOTAL of contributions from individuals	26244.00	331721.93	
(b		0.00	0.00	
(c	c) Other Political Committees (such as PACs)	150.00	9764.41	
(c	TOTAL CONTRIBUTIONS	0.00	0.00	
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	26394.00	341486.34	
	RANSFERS FROM OTHER UTHORIZED COMMITTEES	0.00	0.00	
	OANS:			
(a	Made or Guaranteed by the Candidate	20000.00	120000.00	
(k	·	0.00	0.00	
(c	e) TOTAL LOANS (add Lines 13(a) and (b))	20000.00	120000.00	
	FFSETS TO OPERATING			
	XPENDITURES Refunds, Rebates, etc.)	652.61	695.90	
	OTHER RECEIPTS Dividends, Interest, etc.)	0.00	0.00	
1	OTAL RECEIPTS (add Lines 1(e), 12, 13(c), 14, and 15) Carry Total to Line 24, page 4)	47046.61	462182.24	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	22557.16	378350.23
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS:		
	(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
	(b) Of All Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20.	REFUNDS OF CONTRIBUTIONS TO:		
	(a) Individuals/Persons Other Than Political Committees	24300.00	80263.69
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees	0.00	0.00
	(such as PACs)		0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	24300.00	80263.69
21.	OTHER DISBURSEMENTS	0.00	0.00
2.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	46857.16	458613.92
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	rting period	3378.87
4	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	47046.61
5.	SUBTOTAL (add Line 23 and Line 24)		50425.48
6.	TOTAL DISBURSEMENTS THIS PERIOD (fro	m Line 22)	46857.16
	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)	G PERIOD	3568.32

PAGE FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c Detailed Summary Page 12 13a 13b

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11d

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

	for commercial purposes, other than using the	e name and address of any political committee	
	NAME OF COMMITTEE (In Full) KYLE MCCARTER FOR CONG	RESS COMMITTEE	
<u>. </u>	Full Name (Last, First, Middle Initial) Daniel Duffy		Date of Receipt
	Mailing Address 28032 W Gray Barn		04 01 2016
	City	State Zip Code	Transaction ID : SA11AI.6136
	Lake Barrington	IL 60010	
	FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
	Name of Employer Self	Occupation Consulting	1000.00 Memo Item
	Receipt For: 2016	Election Cycle-to-Date	Contribution
	Primary General Other (specify)	1000.00	
В.	Full Name (Last, First, Middle Initial) Dominique Durbin		Date of Receipt
. د	Mailing Address 2123 E 1150 Ave		04 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Farina	State Zip Code IL 62838	Transaction ID : SA11AI.6141
	FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
	Name of Employer	Occupation	500.00
	Self	Construction	Memo Item
	Receipt For: 2016 Primary General Other (specify)	Election Cycle-to-Date 500.00	Contribution
- с.	Full Name (Last, First, Middle Initial) Jason Gaby		Date of Receipt
O.	Mailing Address 445 Old Homestead Trail		06 13 2016
	City Duluth	State Zip Code GA 30097	Transaction ID : SA11AI.6153
	FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
	Name of Employer Student	Occupation Student	2700.00 Memo Item
	Receipt For: 2016	Election Cycle-to-Date	Contribution
	Primary General Other (specify)	2700.00	
	SUBTOTAL of Receipts This Page (optional)		4200.00

Self

Receipt For: 2016

Primary

Other (specify)

Full Name (Last, First, Middle Initial)

General

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Memo Item
Contribution

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13a 13b 14 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) KYLE MCCARTER FOR CONGRESS COMMITTEE Full Name (Last, First, Middle Initial) Marie Gaby Date of Receipt Mailing Address 445 Old Homestead Trail 06 2016 13 City State Zip Code Transaction ID: SA11AI.6156 GΑ 30097 Duluth FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 2700.00 Name of Employer Occupation Student Student Memo Item Contribution Receipt For: 2016 Election Cycle-to-Date Primary General 2700.00 Other (specify) Full Name (Last, First, Middle Initial) Roberta W. Hillman Date of Receipt Mailing Address 504 W Bleeker St 06 07 2016 City State Zip Code Transaction ID: SA11AI.6120 Aspen CO 81611 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2700.00 Name of Employer Occupation

David Keyston	Date of Receipt			
Mailing Address PO Box 7066		04 11 2016		
City Carmel	State Zip Code CA 93921	Transaction ID : SA11AI.6137		
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period		
Name of Employer	Occupation	250.00		
Retired	Retired	Memo Item		
Receipt For: 2016 Primary General Other (specify)	Election Cycle-to-Date 450.00	Contribution		

2700.00

Retired

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

Election Cycle-to-Date

5650.00

Other (specify)

C.

Full Name (Last, First, Middle Initial)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 7 OF 32 Use separate schedule(s) (check only one) for each category of the 11a 11b 11c 11d Detailed Summary Page 12 13a 13b 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) KYLE MCCARTER FOR CONGRESS COMMITTEE Full Name (Last, First, Middle Initial) **Heather Mercer** Date of Receipt Mailing Address 2857 Paradise Road 06 20 2016 Unit 3001 City State Zip Code Transaction ID: SA11AI.6146 NV 89109 Las Vegas FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 2700.00 Name of Employer Occupation Baker Memo Item Contribution Receipt For: 2016 Election Cycle-to-Date Primary General 2700.00 Other (specify) Full Name (Last, First, Middle Initial) Rebekah Mercer Date of Receipt Mailing Address 240 Riverside Bvd 06 20 2016 Apt 24A City State Zip Code Transaction ID: SA11AI.6150 New York NY 10069 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2700.00 Name of Employer Occupation Entrepreneur Memo Item Entrepreneur Contribution Receipt For: 2016 Election Cycle-to-Date | Primary General

Drew Nicolello		Date of Receipt
Mailing Address 6504 Crawley Drive		05 20 2016
City	State Zip Code	Transaction ID : SA11AI.6089
Plano	TX 75093	Transaction is . OATTALOOGS
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	2500.00
Kharis Media	Principal	Memo Item
Receipt For: 2016	Election Cycle-to-Date	Donation
Primary General Other (specify)	2500.00	

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2700.00

7900.00

FOR LINE NUMBER: Use separate schedule(s) (check only one) 11a 11b

PAGE

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for each category of the 11d 11c Detailed Summary Page 12 13a 13b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) KYLE MCCARTER FOR CONGRESS COMMITTEE Full Name (Last, First, Middle Initial) Lynell Nicolello Date of Receipt Mailing Address 6504 Crawley Dr 2016 20 City State Zip Code Transaction ID: SA11AI.6090 TX 75093 Plano FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 2500.00 Name of Employer Occupation Kharis Media Principal Memo Item Donation Receipt For: 2016 Election Cycle-to-Date | Primary General 2500.00 Other (specify) Full Name (Last, First, Middle Initial) Brian Uihlein Date of Receipt Mailing Address 41 S. Awahner Road 06 17 2016 Citv State Zip Code Transaction ID: SA11AI.6116 Lake Forest IL 60045 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2700.00 Name of Employer Occupation Uline Manager Memo Item Donation Receipt For: 2016 Election Cycle-to-Date | Primary General 2700.00 Other (specify) Full Name (Last, First, Middle Initial) Dave Uihlein Date of Receipt Mailing Address 5208 Dander Road 2016 17 City State Zip Code Transaction ID: SA11AI.6117 MN Edina 55436 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2700.00 Name of Employer Occupation Uline Manager Memo Item Receipt For: 2016 Contribution Election Cycle-to-Date | Yrimary General Other (specify) 2700.00 7900.00 SUBTOTAL of Receipts This Page (optional)..... 25650.00 TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 32 (check only one)

11a 11b X 11c 11d 11d 12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) KYLE MCCARTER FOR CONGRESS COMMITTEE Full Name (Last, First, Middle Initial) ILLINOIS CITIZENS FOR LIFE Date of Receipt Mailing Address PO BOX 843 2016 09 City State Zip Code Transaction ID: SA11C.6104 IL 60302 OAK PARK FEC ID number of contributing Amount of Each Receipt this Period C00293118 federal political committee. 150.00 Name of Employer Occupation Memo Item Donation Receipt For: 2016 Election Cycle-to-Date Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... 150.00 TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 32 (check only one)

11a 11b 11c 11d 11d 12 X 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) KYLE MCCARTER FOR CONGRESS COMMITTEE Full Name (Last, First, Middle Initial) **KYLE MCCARTER** Date of Receipt Mailing Address 1359 IVEY BROOK LANE 2016 01 City State Zip Code Transaction ID: SA13A.6032 IL 62264 **LEBANON** FEC ID number of contributing Amount of Each Receipt this Period H6IL15084 federal political committee. 10000.00 Name of Employer Occupation Self Employed Manufacturing Memo Item Loan Receipt For: 2016 Election Cycle-to-Date | Primary General 110000.00 Other (specify) Full Name (Last, First, Middle Initial) KYLE MCCARTER Date of Receipt Mailing Address 1359 IVEY BROOK LANE 05 17 2016 City State Zip Code Transaction ID: SA13A.6031 **LEBANON** IL 62264 FEC ID number of contributing Amount of Each Receipt this Period С H6IL15084 federal political committee. 10000.00 Name of Employer Occupation Manufacturing Memo Item Self Employed Loan Receipt For: 2016 Election Cycle-to-Date | Primary General 120000.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) 20000.00 SUBTOTAL of Receipts This Page (optional)..... 20000.00

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 32 (check only one)

11a 11b 11c 11d 11d 12 13a 13b X 14 15

Detailed Summary Page 12 13a 14 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) KYLE MCCARTER FOR CONGRESS COMMITTEE Full Name (Last, First, Middle Initial) **MOW Printing** Date of Receipt Mailing Address 526 Vandalia St 2016 20 City State Zip Code Transaction ID: SA14.6078 IL 62234 Collinsville FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 652.61 Name of Employer Occupation Memo Item Refund Receipt For: 2016 Election Cycle-to-Date Primary General 652.61 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify)

<u> </u>	Full Name (Last, First, Middle Initial)		Date of Receipt
Ο.	Mailing Address		M = M / D = D / Y = Y = Y
	City	State Zip Code	
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
	Name of Employer	Occupation	Memo Item
	Receipt For:	Election Cycle-to-Date	_
	Primary General Other (specify)	, ,	
	·		

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

652.61

652.61

PAGE 12 32 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **X** 17 19b 18 19a Detailed Summary Page 20a 20b 20c 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) KYLE MCCARTER FOR CONGRESS COMMITTEE Full Name (Last, First, Middle Initial) Date of Disbursement Authorize.net 2016 Mailing Address PO Box 8999 04 City State Zip Code Amount of Each Disbursement this Period CA San Francisco 94128 Purpose of Disbursement Fees 25.00 003 Memo Item Candidate Name Category/ Type Transaction ID: SB17.6045 Disbursement For: 2016 Office Sought: House Senate Primary General Other (specify) President District: State: Full Name (Last, First, Middle Initial) Authorize.net Date of Disbursement Mailing Address PO Box 8999 04 04 2016 City State Zip Code Amount of Each Disbursement this Period CA 94128 San Francisco Purpose of Disbursement Fees 18.59 003 Memo Item Candidate Name Category/ Type Transaction ID: SB17.6051 Disbursement For: Office Sought: 2016 House Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. Authorize.net Mailing Address PO Box 8999 05 03 2016 City State Zip Code Amount of Each Disbursement this Period San Francisco CA 94128 3.60 Purpose of Disbursement 003 Memo Item Candidate Name Category/ Type Transaction ID: SB17.6057 Disbursement For: 2016 Office Sought: House General Senate Primary President Other (specify) State: District: 47.19 SUBTOTAL of Disbursements This Page (optional).....

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LIN	NUMBE	R:	P/	AGE	13	OF	32
	(check or	(check only one)						
	>	17	1	8		19a		19b
		20a	2	0b		20c		21
ay not be sold or used by any person for the purpose of soliciting contributions								

Any information copied from such Reports and Statements ma or for commercial purposes, other than using the name and address of any NAME OF COMMITTEE (In Full) KYLE MCCARTER FOR CONGRESS COMMITTEE Full Name (Last, First, Middle Initial) Date of Disbursement Authorize.net 2016 Mailing Address PO Box 8999 05 03 City State Zip Code Amount of Each Disbursement this Period CA San Francisco 94128 Purpose of Disbursement fees 25.00 003 Memo Item Candidate Name Category/ Type Transaction ID: SB17.6058 Disbursement For: 2016 Office Sought: House Senate Primary General Other (specify) President District: State: Full Name (Last, First, Middle Initial) Authorize.net Date of Disbursement Mailing Address PO Box 8999 06 02 2016 City State Zip Code Amount of Each Disbursement this Period CA 94128 San Francisco Purpose of Disbursement Fees 25.00 003 Memo Item Candidate Name Category/ Type Transaction ID: SB17.6063 Disbursement For: Office Sought: 2016 House Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. Lisa Bremer Mailing Address 6566 Powers Church Road 04 04 2016 City Zip Code State Amount of Each Disbursement this Period 62960 Metropolis IL 2274.77 Purpose of Disbursement Memo Item Candidate Name Category/ Type Transaction ID: SB17.5991 Office Sought: House Disbursement For: Senate General Primary President Other (specify) State: District: 2324.77 SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE	NUMBE	R:		PAGE	14	OF	32
Use separate schedule(s) for each category of the Detailed Summary Page	(check on							
	×	17		18		19a] 19b
		20a		20b		20c		21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) KYLE MCCARTER FOR CONGRESS COMMITTEE Full Name (Last, First, Middle Initial) Date of Disbursement Mary E. Creasy 2016 Mailing Address 3915 Keokuk St 04 City State Zip Code Amount of Each Disbursement this Period MO St. Louis 63116 Purpose of Disbursement Salary 239.36 Memo Item Candidate Name Category/ Type Transaction ID: SB17.5993 Office Sought: House Disbursement For: Senate Primary General Other (specify) President District: State: Full Name (Last, First, Middle Initial) Kimberly D. Farkas Date of Disbursement D Mailing Address 718 Pleasant Valley Dr 04 04 2016 City State Zip Code Amount of Each Disbursement this Period IL 62035 Godfrey Purpose of Disbursement Salary 1138.93 Memo Item Candidate Name Category/ Type Transaction ID: SB17.5994 Disbursement For: Office Sought: House Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. Mary P. Gray Mailing Address 206 Summerlin Ridge 04 04 2016 City State Zip Code Amount of Each Disbursement this Period O'Fallon 62269 IL 817.33 Purpose of Disbursement Memo Item Candidate Name Category/ Type Transaction ID: SB17.5985 Office Sought: Disbursement For: House General Senate Primary President Other (specify) State: District: 2195.62 SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only).....

PAGE 15 OF 32 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **X** 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

KYLE MCCARTER FOR CONGRESS COMMITTEE

Full Name (Last.	First, Middle Initial)		
•	artment of Employment Security		Date of Disbursement
Mailing Address	4519 W Main Street		06 16 2016
City Belleville Purpose of Disburnemployment I Candidate Name Office Sought:		001 Category/ Type	Amount of Each Disbursement this Period 528.00 Memo Item Transaction ID : SB17.6072
. Illinois Dep	First, Middle Initial) artment of Employment Security 4519 W Main Street		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Belleville Purpose of Disbu Unemployment Candidate Name Office Sought:	House Disbursement For: 2016 Senate Primary General	001 Category/ Type	Amount of Each Disbursement this Period 448.00 Memo Item Transaction ID : SB17.6073
,	District: First, Middle Initial)		Date of Disbursement
Mailing Address	6504 Crawley Dr		M M / D D / Y Y Y Y Y Y O D D / 2016 _
Plano Purpose of Disbu	State Zip Code TX 75093		Amount of Each Disbursement this Period 5000.00
Consulting Candidate Name		001 Category/ Type	Memo Item
Office Sought:	House Senate President Disbursement For: 2016 Primary Other (specify)	7.5	Transaction ID : SB17.6092
	'		5976.00

	FOR LINE NUMBER:				PAGE	16	OF	32
Use separate schedule(s)	(check on							
for each category of the Detailed Summary Page	×	17		18		19a		19k
		20a		20b		20c		21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) KYLE MCCARTER FOR CONGRESS COMMITTEE Full Name (Last, First, Middle Initial) Date of Disbursement MOW Printing 2016 Mailing Address 526 Vandalia St 05 16 City State Zip Code Amount of Each Disbursement this Period IL Collinsville 62234 Purpose of Disbursement Printing 1782.94 006 Memo Item Candidate Name Category/ Type Transaction ID: SB17.6100 Disbursement For: 2016 Office Sought: House Senate Primary General Other (specify) President District: State: Full Name (Last, First, Middle Initial) Payroll Central Date of Disbursement Mailing Address 1107 Frontage Rd 04 04 2016 City State Zip Code Amount of Each Disbursement this Period IL O'Fallon 62269 Purpose of Disbursement Payroll Taxes 2968.95 Memo Item Candidate Name Category/ Type Transaction ID: SB17.5990 Disbursement For: Office Sought: House Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Payroll Central Mailing Address 1107 Frontage Rd 04 2016 19 City State Zip Code Amount of Each Disbursement this Period O'Fallon 62269 IL Purpose of Disbursement Payroll Taxes 707.53 001 Memo Item Candidate Name Category/ Type Transaction ID: SB17.6055 Office Sought: Disbursement For: 2016 House General Senate Primary President Other (specify) State: District: 5459.42 SUBTOTAL of Disbursements This Page (optional).....

PAGE 17 32 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **X** 17 19b 18 19a Detailed Summary Page 20a 20b 20c 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) KYLE MCCARTER FOR CONGRESS COMMITTEE Full Name (Last, First, Middle Initial) Date of Disbursement Carmen Perez 2016 Mailing Address 1510 Herbert St 04 City State Zip Code Amount of Each Disbursement this Period IL South Roxana 62087 Purpose of Disbursement Salary 460.87 Memo Item Candidate Name Category/ Type Transaction ID: SB17.5995 Office Sought: House Disbursement For: Senate Primary General Other (specify) President District: State: Full Name (Last, First, Middle Initial) Printforce Inc. Date of Disbursement D Mailing Address 1409 East Main St 06 16 2016 City State Zip Code Amount of Each Disbursement this Period IL 62450 Olney Purpose of Disbursement Printing 15.74 006 Memo Item Candidate Name Category/ Type Transaction ID: SB17.6094 Disbursement For: Office Sought: 2016 House Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. Regions Bank Mailing Address 400 E US 50 04 29 2016 City State Zip Code Amount of Each Disbursement this Period 62269 O'Fallon IL Purpose of Disbursement Bank Fee 22.00 001 Memo Item Candidate Name Category/ Type Transaction ID: SB17.6050 Disbursement For: 2016 Office Sought: House General Senate Primary President Other (specify) State: District: 498.61 SUBTOTAL of Disbursements This Page (optional).....

	FOR LINE	NUMBE	R:		PAGE	18	OF	32
Use separate schedule(s)	(check only one)							
for each category of the Detailed Summary Page	×	17		18		19a		19b
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	ny information copied from such Reports and Statements may not be sold or used by any r for commercial purposes, other than using the name and address of any political committe	
	NAME OF COMMITTEE (In Full) KYLE MCCARTER FOR CONGRESS COMMITTEE	
Α.	Full Name (Last, First, Middle Initial) Regions Bank Mailing Address 400 E US 50	Date of Disbursement 05 31 2016
	City State Zip Code O'Fallon IL 62269 Purpose of Disbursement Fees 001 Candidate Name 001 Category/ Type Office Sought: House Senate President President Other (specify) State: District:	Amount of Each Disbursement this Period 22.00 Memo Item Transaction ID : SB17.6062
В.	Full Name (Last, First, Middle Initial) SI Dollar Saver Mailing Address 109 N Main Cross Street	Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Zip Code Galatia IL 62935 Purpose of Disbursement Advertising 004 Candidate Name Category/ Type Office Sought: House Senate President President Other (specify) State: District:	Amount of Each Disbursement this Period 250.72 Memo Item Transaction ID: SB17.6061
C.	Full Name (Last, First, Middle Initial) Sharon Steele Mailing Address 420 Park Dr	Date of Disbursement M M M / D D / Y Y Y Y Y Y O Y O O O O O O O O O O O
	City State Zip Code Bethalto IL 62010 Purpose of Disbursement Reimbursement Candidate Name Office Sought: House Senate President State: District: Primary General Other (specify)	Amount of Each Disbursement this Period 131.24 Memo Item Transaction ID: SB17.6049
Г	SUBTOTAL of Disbursements This Page (optional)	403.96

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or	r for commercial pu	urposes, other than us	sing the name and address of any poli	tical committee	to solicit contributions from such committee.
	NAME OF COMM KYLE MCC		ONGRESS COMMITTEE		
Α.	Full Name (Last, I	First, Middle Initial) ele			Date of Disbursement
	Mailing Address	420 Park Dr			04 04 2016
	City Bethalto		State Zip Code IL 62010		Amount of Each Disbursement this Period
	Purpose of Disbu Salary	rsement			Memo Item
	Candidate Name			Category/ Type	Transaction ID : SB17.5988
	Office Sought:	House Senate President	Disbursement For: Primary General Other (specify)		
	State:	District:			
В.	Charan Cta	First, Middle Initial) ele			Date of Disbursement
	Mailing Address	420 Park Dr			04 19 2016
	City Bethalto		State Zip Code IL 62010		Amount of Each Disbursement this Period
	Purpose of Disbu payroll	rsement		001	1231.50 Memo Item
	Candidate Name			Category/ Type	Transaction ID : SB17.6056
	Office Sought:	House Senate President	Disbursement For: 2016 Primary General Other (specify)		
	State:	District:			
C.	Full Name (Last, I	First, Middle Initial) akers			Date of Disbursement
	Mailing Address	PO Box 1082			06 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Springfield		State Zip Code VA 22151		Amount of Each Disbursement this Period
	Purpose of Disbu Fundraising Cons	rsement sulting		003	2000.00
	Candidate Name			Category/ Type	Memo Item Transaction ID : SB17.6077
	Office Sought:	House Senate President	Disbursement For: 2016 Primary General Other (specify)		
	State:	District:			
5	SUBTOTAL of Disb	ursements This Page	(optional)		4805.23

PAGE 20 32 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **X** 17 18 19b 19a Detailed Summary Page 20a 20b 20c 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) KYLE MCCARTER FOR CONGRESS COMMITTEE Full Name (Last, First, Middle Initial) Date of Disbursement Teresa F. Wagner 2016 Mailing Address 4907 Raccoon Run Road 04 City State Zip Code Amount of Each Disbursement this Period OH Johnstown 43031 Purpose of Disbursement Salary 608.24 Memo Item Candidate Name Category/ Type Transaction ID: SB17.5996 Office Sought: House Disbursement For: Senate Primary General Other (specify) President District: State: Full Name (Last, First, Middle Initial) Date of Disbursement В. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Memo Item Candidate Name Category/ Type Disbursement For: Office Sought: House Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Memo Item Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) State: District: 608.24 SUBTOTAL of Disbursements This Page (optional)..... 22319.04

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	HEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate scl for each categor Detailed Summar	y of the	FOR LINE NUMBER: PAGE 21 OF 32 (check only one) 17
	r information copied from such Reports and Statements motion commercial purposes, other than using the name and a			
	NAME OF COMMITTEE (In Full) KYLE MCCARTER FOR CONGRESS C	OMMITTEE		
	Full Name (Last, First, Middle Initial) Robert Arnott			Date of Disbursement
Ī	Mailing Address 4100 Newport Place Dr Ste 750			05 15 2016
	City State Newport Beach CA	Zip Code 92660		Amount of Each Disbursement this Period
Ī	Purpose of Disbursement reimbursement		010	2700.00 Memo Item
(Candidate Name		Category/ Type	Transaction ID : SB20A.6039
(Office Sought: House Disbursement For Senate Primary Other (s	X General		
	State: District: Full Name (Last, First, Middle Initial)			
В.	Barbara Gaby Mailing Address 445 Old Homestead Trail			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Duluth GA	Zip Code 30097		Amount of Each Disbursement this Period
_	Purpose of Disbursement Reimbursement of Contribution		010	2700.00
(Candidate Name		Category/ Type	Memo Item Transaction ID : SB20A.6124
	Office Sought: House Disbursement For	General		
	Full Name (Last, First, Middle Initial)			
	Richard Gaby			Date of Disbursement
Ī	Mailing Address 445 Old Homestead Trail			05 D / Y Y Y Y Y Y 15 2016
		p Code 0097		Amount of Each Disbursement this Period
	Purpose of Disbursement Reimbursement of Contribution		010	2700.00 Memo Item
-	Candidate Name		Category/ Type	Transaction ID : SB20A.6125

Office Sought:

State:

House

Senate

District:

President

Disbursement For: 2016

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

Primary

Other (specify)

Meneral General

8100.00

	FOR LINE NUMBER:		PAGE	22	OF	32
Use separate schedule(s)	(check only one)					
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av not be sold or used by any	person for the purpose	of so	olicitina	cont	ributio	าทร

Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) KYLE MCCARTER FOR CONGRESS COMMITTEE Full Name (Last, First, Middle Initial) Date of Disbursement Tatnall L. Hillman 2016 Mailing Address 504 W Bleeker St 05 15 City State Zip Code Amount of Each Disbursement this Period CO Aspen 81611 Purpose of Disbursement Contribution Refund 2700.00 010 Memo Item Candidate Name Category/ Type Transaction ID: SB20A.6119 Disbursement For: 2016 Office Sought: House Senate Primary ✓ General Other (specify) President District: State: Full Name (Last, First, Middle Initial) Virginia James Date of Disbursement D Mailing Address PO Box 60 05 15 2016 City State Zip Code Amount of Each Disbursement this Period NJ 08530 Lambertville Purpose of Disbursement reimbursement 2700.00 010 Memo Item Candidate Name Category/ Type Transaction ID: SB20A.6042 Disbursement For: Office Sought: House 2016 X General Senate Primary Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. Diana Mercer Mailing Address PO Box 1507 05 2016 15 City State Zip Code Amount of Each Disbursement this Period Stony Brook NY 11790 2700.00 Purpose of Disbursement Reimbursement of Contribution 010 Memo Item Candidate Name Category/ Type Transaction ID: SB20A.6122 Disbursement For: 2016 Office Sought: House X General Senate Primary President Other (specify) State: District: 8100.00 SUBTOTAL of Disbursements This Page (optional).....

PAGE 23 32 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the 17 18 19a 19b Detailed Summary Page **X** 20a 20b 20c 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) KYLE MCCARTER FOR CONGRESS COMMITTEE Full Name (Last, First, Middle Initial) Date of Disbursement Elizabeth A. Uihlein 2016 Mailing Address 1396 N. Waukegan Rd 05 15 City State Zip Code Amount of Each Disbursement this Period IL Lake Forest 60045 Purpose of Disbursement Contribution Refund 2700.00 010 Memo Item Candidate Name Category/ Type Transaction ID: SB20A.6110 2016 Office Sought: House Disbursement For: X General Senate Primary Other (specify) President District: State: Full Name (Last, First, Middle Initial) Richard E. Uihlein Date of Disbursement Mailing Address 1396 N. Waukegan Rd. 05 15 2016 City State Zip Code Amount of Each Disbursement this Period IL 60045 Lake Forest Purpose of Disbursement Contribution Refund 2700.00 011 Memo Item Candidate Name Category/ Type Transaction ID: SB20A.6111 Disbursement For: Office Sought: House 2016 X General Senate Primary Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City Zip Code State Amount of Each Disbursement this Period Purpose of Disbursement Memo Item Candidate Name Category/ Type Office Sought: Disbursement For: House

General

Primary

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

Other (specify)

State:

Senate

District:

President

5400.00

21600.00

SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s) for each category of the

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ANS			Detailed Summary Pag	ge (check only one)
ME OF COMMITTEE (In Full)			Transac	tion ID : SC/10.4176
LOAN SOURCE Full Name				Flacking 2010
KYLE MCCARTER	(Last, First, Midt	gie IIIIIai) PERSONAL FU	NDS] Memo Item	Election: 2016 Primary General
Mailing Address 1359 IVEY BROOK LANE				Other (specify) ▼
City		State ZIP Coc	le	
LEBANON		IL 62264		
Original Amount of Loan	10000.00	Cumulative Payment To	Date Bala	nce Outstanding at Close of This Perio
TEDMS		9 9		2 2 2
Date Incurred	Ž015 Y	Date Due	Interest Rate 731/2016 0.0	
List All Endorsers or Guara		Loan Source		
1. Full Name (Last, First, M	liddle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	7
2. Full Name (Last, First, Mi	ddle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	7 7 7
3. Full Name (Last, First, Mi	ddle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	7
4. Full Name (Last, First, Mi	ddle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	7
JBTOTALS This Period This	Page (optional)			10000.00
OTALS This Period (last page	in this line only)			7 7 7 7
arry outstanding balance onl	v to LINE 3. Sche	edule D. for this line. If r	o Schedule D. carry forw	vard to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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Detailed Summary Page Transaction ID: SC/10.4178 NAME OF COMMITTEE (In Full) KYLE MCCARTER FOR CONGRESS COMMITTEE LOAN SOURCE Full Name (Last, First, Middle Initial) 'PERSONAL FUNDS] Election: 2016 Memo Item Primary **KYLE MCCARTER** General Mailing Address Other (specify) 1359 IVEY BROOK LANE State ZIP Code City IL 62264 **LEBANON** Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 50000.00 0.00 50000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 0.00 ^M 10^M ^D22 2015 12/31/2016 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 50000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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	13b

32

Transaction ID: SC/10.4537 NAME OF COMMITTEE (In Full) KYLE MCCARTER FOR CONGRESS COMMITTEE LOAN SOURCE Full Name (Last, First, Middle Initial) 'PERSONAL FUNDS] Election: 2016 Memo Item Primary **KYLE MCCARTER** General Mailing Address Other (specify) 1359 IVEY BROOK LANE State ZIP Code City IL 62264 **LEBANON** Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 40000.00 0.00 40000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 0.00 ^M 02^M 09 2016 12/31/2016 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 40000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)

Use separate schedule(s)

FOR LINE NUMBER:

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	13b

DANS				itegory of the immary Page	(check only or	ne) X 13a
AME OF COMMITTEE (In Full)	NICDECC C			Transactio	on ID : SC/10.6032	
YLE MCCARTER FOR CO	INGRESS C	OMMITTEE				
LOAN SOURCE Full Name (Last, KYLE MCCARTER	First, Middle Initi	al)	Memo	_	Election: 2016 Primary General	
Mailing Address 1359 IVEY BROOK LANE					Other (specify)	▼
City	State	ZIP Cod	de			
LEBANON	IL	62264				
Original Amount of Loan	Cumu	lative Payment To	Date	Balanc	e Outstanding at C	lose of This Per
10000	0.00		0.00	ــا لــٰ		10000.00
Date Incurred MO4 ^M / DO1 ^D / Y Ž016	Y M M M	Date Due	0/0/00 Y	nterest Rate	% (apr)	Secured:
List All Endorsers or Guarantors	(if anv) to Loan	Source			(1)	Yes N
Full Name (Last, First, Middle I	• • • • • • • • • • • • • • • • • • • •		Name of Empl	oyer		
Mailing Address			Occupation			
City	State ZIP (Code	Amount Guaranteed Outstanding:			
2. Full Name (Last, First, Middle In	itial)		Name of Empl	oyer		
Mailing Address			Occupation			
City	State ZIP (Code	Amount Guaranteed Outstanding:			
3. Full Name (Last, First, Middle In	itial)		Name of Empl	oyer		
Mailing Address			Occupation			
City	State ZIP (Code	Amount Guaranteed Outstanding:		7	
4. Full Name (Last, First, Middle In	itial)		Name of Empl	oyer		
Mailing Address			Occupation			
City	State ZIP (Code	Amount Guaranteed Outstanding:		7	
UBTOTALS This Period This Page (optional)			. .		10000.00
OTALS This Period (last page in this	s line only)			· [.	7	
Carry outstanding balance only to LI	NE 3. Schedule Γ), for this line. If	no Schedule D	carry forwar	d to appropriate	line of Summan

SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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SAILO .			Detailed Summary	/ Page		13b
AME OF COMMITTEE (In Full)				nsaction	ID : SC/10.6031	
(YLE MCCARTER FOR C						
LOAN SOURCE Full Name (Last	First, Middle	Initial)	Memo Item		ection: 2016	
KYLE MCCARTER					Primary General	
Mailing Address 1359 IVEY BROOK LANE					Other (specify)	
City	Sta	ite ZIP C	ode			
LEBANON	Į.	L 62264				
Original Amount of Loan	Cu	umulative Payment To	o Date	Balance	Outstanding at Clos	e of This Peri
1000	00.00		0.00		, , .	10000.00
TERMS Date Incurred		Date Due	e Interest	Rate	Se	ecured:
M 05 ^M / D 17 ^D / Y 2016	M I	M / D D / Y	0/0/00 Y	0.00	% (apr)	Yes X
List All Endorsers or Guarantors		oan Source				
1. Full Name (Last, First, Middle	Initial)		Name of Employer			
Mailing Address			Occupation			
City	State Z	IP Code	Amount Guaranteed Outstanding:			
2. Full Name (Last, First, Middle I	Initial)		Name of Employer			
Mailing Address			Occupation			
			Amount			
City	State Z	IP Code	Guaranteed Outstanding:	7		·
3. Full Name (Last, First, Middle I	Initial)		Name of Employer			
Mailing Address			Occupation			
			Amount			
City	State Z	IP Code	Guaranteed Outstanding:	7	7	
4. Full Name (Last, First, Middle I	Initial)		Name of Employer			
Mailing Address			Occupation			
City	State Z	ZIP Code	Amount Guaranteed Outstanding:	7		
SUBTOTALS This Period This Page	(optional)		·····		7 7	10000.00
TOTALS This Period (last page in th	is line only)		······		, 1	20000.00
Carry outstanding balance only to I	INF 3 Schedu	le D. for this line If	no Schedule D. carry	forward	to appropriate line	of Summary

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 29 OF
FOR LINE NUMBER:
(check only one)

FOR LINE NUMBER: (check only one) 9 X 10

NAME OF COMMITTEE (In Full) KYLE MCCARTER FO	OR CON	GRESS C	
A. Full Name (Last, First, Middle Initial) of Deb Direct Match Media Mailing Address 105 Mofffett Ave	tor or Creditor		Nature of Debt (Purpose): Media Consulting
City State	Zip Code	00004	
Collinsville	IL	62234	Transaction ID : SD10.6021
Outstanding Balance Beginning This Period 2250.00			Transaction ID: SD10.0021
Amount Incurred This Period	Paym	nent This Period	Outstanding Balance at Close of This Period
0.00		0.00	2250.00
B. Full Name (Last, First, Middle Initial) of Debt Kharis Media	or or Creditor		Nature of Debt (Purpose): Media Consulting
Mailing Address 6504 Crawley Dr			
City State Plano	Zip Code TX	75093	
Outstanding Balance Beginning This Period 5000.00 Amount Incurred This Period 0.00	Paym	nent This Period 5000.00	Transaction ID : SD10.6016 Outstanding Balance at Close of This Period 0.00
	7	7	
C. Full Name (Last, First, Middle Initial) of Deb Miller Office Equiptment	tor or Creditor		Nature of Debt (Purpose): Office Equiptment Rental
Mailing Address PO Box 204			
City Olney	State IL	Zip Code 62450	
Outstanding Balance Beginning This Period 100.65			Transaction ID : SD10.6025
Amount Incurred This Period 0.00	Paym	nent This Period	Outstanding Balance at Close of This Period 0.00
1) SUBTOTALS This Period This Page (optional).			2250.00
2) TOTALS This Period (last page this line number	er only)		·
3) TOTAL OUTSTANDING LOANS from Schedule	e C (last page only	y)	\
4) ADD 2) and 3) and carry forward to appropria	te line of Summar	y Page (last page only)	•

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 30 OF
FOR LINE NUMBER:
(check only one)

9 **X** 10

•		
NAME OF COMMITTEE (In Full)		
KYLE MCCARTER FOR CONGRESS	COMMIT	TEE

KYLE MUCARTER FUR	1 0011011E00 00	
A. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of Debt (Purpose):
MOW Printing		Printing
Ĭ		
Mailing Address 526 Vandalia St		
City State	Zip Code	
Collinsville	IL 62234	
Outstanding Balance Beginning This Period		Transaction ID : SD10.6027
1782.94		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
	 	
0.00	1782.94	0.00
	,	,
B. Full Name (Last, First, Middle Initial) of Debtor of	r Creditor	Nature of Debt (Purpose):
Osage Strategies LLC		Strategic Consulting
Mailing Address 11 Grandview Circle		
Ste200		_
City State	Zip Code	
Canonsburg	PA 15317	
Outstanding Balance Beginning This Period		Transaction ID : SD10.6018
7364.32		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
7		
0.00	0.00	7364.32
C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of Debt (Purpose):
Printforce Inc.		Printing
Mailing Address 1409 East Main St		
0.1	01-1 7'- 01-	
City	State Zip Code	
Olney	IL 62450	
Outstanding Balance Beginning This Period		Transaction ID : SD10.6024
45.74		
15.74		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	45.74	0.00
0.00	15.74	0.00
		7004.00
) SUBTOTALS This Period This Page (optional)	>	7364.32
2) TOTALS This Period (last page this line number o	nly)	
B) TOTAL OUTSTANDING LOANS from Schedule C	(last page only)	
ADD 2) and 3) and carry forward to appropriate li	ne of Summary Page (last page only)	1

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 31 OF
FOR LINE NUMBER:
(check only one)

	9
X	10

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NAME OF COMMITTEE (In Full)

KYLE MCCARTER	FOR	CONGRESS	COMMITTEE

			Nature of Debt (Purpose):
A. Full Name (Last, First, Middle Initial) of Debto	or Greditor		Compliance Consulting
Professional Data Services			- Compression Community
Mailing Address 824 S. Milledge Ave			
Ste 101	Zip Code		
City State Athens	Zip Code GA	30605	
Outstanding Balance Beginning This Period	- GA	30003	Transaction ID : SD10.6019
1526.90			
Amount Incurred This Period	Payn	nent This Period	Outstanding Balance at Close of This Period
0.00		0.00	1526.90
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose):
SCWard Consulting	or orealist		Fundraising Consulting
Mailing Address PO Box 1021			
City State	Zip Code		
Syracuse	NY	13206	
Outstanding Balance Beginning This Period			Transaction ID : SD10.6029
5000.00			
Amount Incurred This Period	Payn	nent This Period	Outstanding Balance at Close of This Period
0.00	,	0.00	5000.00
C. Full Name (Last, First, Middle Initial) of Debto	or or Creditor		Nature of Debt (Purpose):
Tele-Town Hall Services			Teleconference Services
Mailing Address 4600 North Fairfax Dr Ste 802			
City	State	Zip Code	
Arlington	VA	22203	
Outstanding Balance Beginning This Period			Transaction ID: SD10.6028
7037.36			
Amount Incurred This Period	Payn	nent This Period	Outstanding Balance at Close of This Period
0.00		0.00	7037.36
SUBTOTALS This Period This Page (optional)			13564.26
TOTALS This Period (last page this line number	only)		·,
TOTAL OUTSTANDING LOANS from Schedule	C (last page onl	y)	·,
ADD 2) and 3) and carry forward to appropriate	line of Summar	ry Page (last page only)	>
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Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 32 OF
FOR LINE NUMBER:
(check only one)

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X	10

NAME OF COMMITTEE (In Full)		
KYLE MCCARTER FOR	CONGRESS	COMMITTEE

TIEL WOOMTHEET O		0.1200 00	
A. Full Name (Last, First, Middle Initial) of Debto The Rainmakers	r or Creditor		Nature of Debt (Purpose): Fundraising Consulting
Mailing Address PO Box 1082			
City State	Zip Code		-
Springfield	VA	22151	
Outstanding Balance Beginning This Period			Transaction ID : SD10.6020
15857.37			
Amount Incurred This Period	Paym	nent This Period	Outstanding Balance at Close of This Period
0.00		2000.00	13857.37
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose):
Victory Geek			Telephone System
Mailing Address 4114 IL Rt 176			
City State	Zip Code		
Crystal Lake	IL	60014	
Outstanding Balance Beginning This Period			Transaction ID : SD10.6022
3086.74			
Amount Incurred This Period	Pavm	nent This Period	Outstanding Balance at Close of This Period
	. ayıı	0.00	3086.74
0.00		0.00	3000.74
C. Full Name (Last, First, Middle Initial) of Debto	or or Creditor		Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	_
City	State	Zip Code	
Outstanding Balance Beginning This Period			
Amount Incurred This Period	Paym	nent This Period	Outstanding Balance at Close of This Period
	· · · · ·		1
9 9 9		7	
SUBTOTALS This Period This Page (optional)			16944.11
CODICIALO IIIIO I GIIOU IIIIO FAGE (Optiolial)			
TOTALS This Period (last page this line number	only)	>	40122.69
TOTAL OUTSTANDING LOANS from Schedule	C (last page only	y)	120000.00
ADD 2) and 3) and carry forward to appropriate	line of Summar	y Page (last page only)	160122.69
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